

**MINUTES OF THE
MEDICAL LICENSING BOARD OF INDIANA**

**Meeting Held
February 24, 2005**

**9:00 A.M.
CONFERENCE CENTER ROOM B
INDIANA GOVERNMENT CENTER SOUTH
302 WEST WASHINGTON STREET
INDIANAPOLIS, INDIANA**

I. CALL TO ORDER

Dr. Krejsa called the meeting to order at 10:50 a.m. in Conference Center Room B, 302 West Washington Street, Indianapolis, Indiana and declared a quorum in accordance with IC § 25-22.5.

Members Present:

N. Stacy Lankford, M.D., Vice-President
Richard Krejsa, D.O.,
Worthe Holt, M.D., Secretary
Barbara Malone, J.D., Consumer Member
Ralph Stewart, M.D.,
William H. Beeson, M.D.

Members Not Present:

Bharat H. Barai, M.D., President

Staff Present:

Angela Smith Jones, Board Director, Health Professions Bureau
Jeanette Roberts, Assistant Board Director, Health Professions Bureau
James Schmidt, Legal Counsel, Office of the Attorney General
Gordon White, Legal Counsel, Office of the Attorney General

II. ADOPTION/AMENDMENTS TO THE AGENDA

A motion was made and seconded to adopt the agenda as amended.

Holt/Malone
Motion carried 4/0/0

III. ADOPTION/AMENDMENTS TO THE MINUTES of January 27, 2005

A motion was made and seconded to adopt the minutes of January 27, 2005.

Holt/Malone
Motion carried 4/0/0

IV. PROBATIONARY APPEARANCES
(Before one member of the Board only)

The physicians listed, appeared per their order and no other issues arose during the probationary appearance:

Stephen Matthews, M.D.
Jan Alan Mayer, M.D.
Deborah Provisor, M.D.
Glenn Ballengee, M.D.
Ruth Serneels, M.D.
Jeffrey Seizys, M.D.
Andrew Wyant, M.D.
Janie Lou Jones, M.D.

VI. PERSONAL APPEARANCES
Re: Initial Application

- A. Gregg Philip Allen, MD:** He appeared before the Board to explain why he took the SPEX. He explained that the Arizona Board requires you to take SPEX if you have not passed your specialty boards within a certain amount of time. He also has restrictions on his Texas licesne to only practice administrative medicine. The Texas Board has the ability to create that category of license in Texas if you go two years without practicing clinical medicine then they issue this type of license. It is not a disciplinary action.

A motion was made to grant licensure.
Malone/Lankford
6/0/0

- B. Thomas Zander Hayward III, MD:** He appeared before the Board to explain his positive response to question number 7 regarding ever been admonished, censured, etc. He explained that he was admonished by the program director because he raised his voice to a nurse in the operating room. He apologized to the nurse and the other operating room staff privately and publicly. He never went before a hearing board. He resigned for personal reasons. He is currently an assistant professor at IUPUI. He plans on working at Wishard and I.U. in trauma and critical care.

A motion was made to grant licensure.
Beeson/Lankford
6/0/0

- C. Matthew W. Hearn, DDS, MD:** Dr. Hearn appeared before the Board due to his positive response to question number 5. He received substance abuse counseling in the past and his sobriety date is November 16, 2003. He was not diagnosed with alcoholism and went through a year of monitoring. He was recently evaluated by Dr. Frick and Dr. Frick does not recommend counseling.

A motion was made to grant licensure.
Malone/Holt
4/0/0

- D. Adam Cline, DC:** (applying for a Professional Acupuncture License): Dr. Cline answered yes to question number 5 on his acupuncture application. The arrest occurred when he was in undergrad at Ball State. He went to the Hemp Fest and consumed alcohol and had marijuana on his person. He appeared before the Board last month and was granted a probationary license; however, he cannot sign a contract with ISMA as they do not monitor chiropractors. He is here to ask the board what he should do. His chiropractic license was issued without restriction. He enrolled in an intensive outpatient program and they suggested that he just do the remission treatment which is just once a week. He has to comply with the program as set out by the letter from Mr. Catron and Dr. Kelly. This will replace the ISMA contract requirement.

A motion was made to change the probationary license accordingly.
Lankford/Malone
6/0/0

- E. Craig Steven Larson, MD:** Dr. Larson answered yes question number 7. He attended a mandatory retreat for his residency training program and the questions got very weird and personal and he was offended by them and left the retreat and called the program director to report the incident. Subsequent to that, he was over scrutinized, criticized and micromanaged. They then dismissed him from the program and did not give him credit for the time he trained there. There is a letter for the program. It says that he exhibited deficiencies in his residency.

A motion was made to table this application pending receipt of a letter from the residency program director addressed to the Medical Licensing Board of Indiana (the Ohio radiology program) and a psychiatric evaluation from a Board approved psychiatrist. (either Ohio or Indiana)
Beeson/Stewart
6/0/0

- F. Imran Shaikh, MD:** Dr. Shaikh did not appear before the Board.
- G. Martin Smolick, MD:** Dr. Smolick did not appear before the Board.
- H. Robert Tumacder, MD:** Dr. Tumacder did not appear before the Board.
- I. William Summerlin, MD:** Dr. Summerlin did not appear before the Board.
- J. Mark Bryniarski, MD:** Dr. Bryniarski answered yes to question number 1. In 1999 he was completing his training in Washington State and he mooned a female custodial worker. It was in the morning after he was on call and he was in the residents lounge and as she passed by, he mooned her. He did discuss this with a psychiatrist. It was determined that it was an expression and response to a stressful situation. He had never seen her before, or met her.

He was originally disciplined in Washington then Kansas and New Mexico put the same stipulations on his license as well. His evaluation by the psychologist says it was an incident of exhibitionism brought on by stress. She feels he is at a very low risk of doing this again.

A motion was made to table this application until the Board received an updated evaluation.

Holt/

The motion died for lack of a second.

A motion was made to deny the license based upon his not being forthright with the board and the disciplinary actions taken against his license in three other state boards.

Beeson/Lankford

The board offered him opportunity to w/d his application.

Dr. Bryniarski withdrew his application for licensure.

- K. Daniel Case, DO:** Dr. Case appeared before the Board because of his positive response to question number 5. In 1997 he was arrested for DUI, he was pulled over for driving without a head light. He had to pay a fine and went to a defensive driving course through the courts and some community service was required. He has never been seen by an addictionologist. He has no objection to getting one. He lives in Olympia, WA and is a first year radiology resident. He has never had any other actions against him.

A motion was made to get an addictionology evaluation and pending a positive evaluation to grant licensure, upon review by the Board designee.

Beeson/Lankford

4/0/0

- L. Anthony Cheng, MD:** Dr. Cheng is an anesthesiologist from California. He answered yes to question number 6 due to suspension of his ospital privileges. The Suspension was in 1993 due to an economic credentialing group. A managed care group came in and wanted to squeeze out the competition. He had a hearing and his privileges were fully reinstated. There was a malpractice case in 1997, when the laser caught on fire. They sued all physicians listed on the chart and the hospital, the manufacturer and the leasing company. The patient recovered went home fine and 6 months later he died of unknown causes. He has been practicing in New Mexico, and California. He has a letter from his current hospital regarding his good standing and current privileges. The letter states that the director is well aware of the charges for suspension and knows that they were economically related and never went to standard of care.

A motion was made to grant licensure.

Holt/Lankford

4/0/0

- M. Neil Borden, MD:** Dr. Borden's privileges were temporarily restricted because someone in the hospital did not like the procedure he used in doing biopsies. He changed to do it under CT guidance per their recommendations. There are no other issues with his license. He practices teleradiology.

A motion was made to grant licensure.

Lankford/Krejsa

6/0/0

N. Victor J. DeMarco, MD: Dr. DeMarco appeared before the Board due to his positive response regarding malpractice. He explained the details of the case which settled for \$900,000. He only viewed the films one time and she was later diagnosed with lung cancer. This is the only malpractice judgment in his history. This settlement was in Cuyahoga County, Ohio.

A motion was made to grant licensure.
Lankford/Malone
4/0/0

O. William Roberts, MD: Dr. Roberts answered yes to question 1, 3, 6 and 7. He had trouble in Hawaii and Arizona. In June 2000 he went for 90 days of inpatient treatment for substance abuse. His drug of choice was Fentanyl. He voluntarily surrendered his DEA and his Arizona license. After 6 months, his DEA was reinstated with restrictions. He could not handle controlled substances per that order. His Arizona license is now unrestricted. All of the hospitals suspended his privileges based upon the action. His license was "inactivated" in 2002 in Hawaii but the word they in the paperwork said "suspended". He would have to go back to Hawaii to get it activated. The Arizona license is on probation. He just received an unrestricted Florida license.

He only makes personal appearances before the Board if they request his appearance. The board would want communication and documentation from the Arizona Board to show compliance. Dr. Roberts shall:

- Submit urines;
- Can only get medications/prescriptions from his physician;
- He Must keep logs of controlled substances written;
- He shall appear before the Board upon request;
- He is to see an addictionologist quarterly;
- Indiana would need the Arizona reports on a quarterly basis and if we don't get the reports, then the Board will call him in.

A motion was made to grant a probationary license with the same terms and conditions as the Arizona order as well as the above mentioned terms.

Lankford/Malone
4/0/0

Re: Renewal Application

P. Colin Elliott, MD: Dr. Elliott reappeared before the Board per their request; however his psychiatric evaluation was illegible. Dr. Elliott will appear next month.

Q. Mitchell Simons, MD: Dr. Simons did not appear before the Board.

VI. PRESENTATION

A. PANEL DISCUSSION

Re: Foreign Trained Physicians and Unapproved Programs

Indiana Academy of Family Physicians presented before the Board regarding this issue. Dr. Feldman presented to the Board on behalf of the attendees. He is the program director for the family practice residency at St. Francis.

Dr. Martin,
Dr. Dave Pepple
Dr. Cliff Knight
Dr. Amy Vanter
Dr. Judy Monroe
Paul, Terre haute
Dr. Bob Lubitz,
Kevin Speer, JD

The issue of evaluating foreign medical graduates (FMG's) is a challenge for the board and residency programs. The Medical Licensing Board of Indiana (MLB) must evaluate the applicant and the school. The Family Practice Programs are aware of the statutory requirements placed upon the board.

They need clarification, and want to know which schools are approved by the Board so that they can make educated decisions on who to select for their slots. Secondly, family medicine is in jeopardy and is headed for a crisis in Indiana and across America, and they understand that it is not the Board's problem, but it does translate to a concern for all of us. 2/3 of our counties are designated as underserved. They want the opportunity to accept students who are not on the approved list for a 3 year program and be certified by an Indiana Family Practice Residency director for approval. And upon that certification, then they would be on equal footing as the other candidates. This would allow for a thorough assessment of the candidates.

80% of the residents trained in the program stay in Indiana. They will supply the need. The family practice physicians do stay in underserved areas, especially the FMG's. According to the most recent survey, 55 counties are deemed to be underserved. In the State of Indiana, there are 11 residency programs with an average of 78 spots per year.

The Board mentioned a person coming in and getting a "preliminary" evaluation period under the direction of the program or hospital. He personally is not in favor of granting waivers (Beeson), especially for 78 people per year. The board could be functioning in a dysfunctional manor if we let everyone in without proper evaluation. We could carve out an exception for a select period of time and possibly bring in the Governor's office. If we could have an initial period of taking someone in and evaluating the candidates through the residency programs, that would provide a safety net and an evaluation.

What is the attrition rate in the programs? In Ft. Wayne they have fired 4 candidates; none of them were from Caribbean schools. One school, has two students

that took the basic program on the Island and transferred to I.U. and are doing well. At St. Vincent's, she fired one resident who was an American graduate.

What percentage of the family practice residents are FMGs? Nationally 58% are filled with FMG's. (In Ft. Wayne less than 20% are FMG's). In internal medicine 51% are FMG.

They are asking the Board to waive foreign grads who are not on the list, and let them evaluate and approve them. The programs will work with the Board and report back to the Board to let them know if the candidates are competent. When the board gives a training permit, then the board is evaluating them for full licensure. The programs do evaluate them prior to offering them a position. No one wants a poor quality candidate in their program. He has more poor American graduates than foreign. This problem will begin to rear its head in the internal medicine sub-specialties as well.

Holt: Since we don't have a mechanism similar to what they've done in California. A group of educators could evaluate the program and come back and present to the board, according to the LCME. That would be ideal. It would be cost prohibitive. RRC (residency review committee) there are certain criteria that must be met to successfully complete the program. It is moving more towards a competency based program. Now all specialties are required to measure their competence objectively, their clinical, communication, systems based management, etc. They have to certify to the ACGME that they are competent.

They are asking for a "waiver" to at least accept them and then the Board will make their evaluation and the residency program will make their evaluation, and the program will not ask for them to be approved until after they are approved.

Holt, it makes sense to give high consideration to a waiver on a case by case basis, prior to residency training one month rotation and come before the Board with the program director to request the waiver. Let's have another meeting with the Board members and the members of the Indiana Academy of Family Physicians and a few others to develop this committee to further dialog on this matter and prepare a package to present to the board,.

Ms. Malone would like to have the matter set for the agenda in March or outside of the Board meeting to further discuss this matter.

VII. ADMINISTRATIVE HEARINGS

A. STEPHEN B. MASON, M.D. (CONTINUED)

Cause No.: 2004 MLB 0041

Re: Final Hearing

B. RUSSELL MANTHEY, M.D. (CONTINUED)

Cause No.: 2004 MLB 0018

Re: Final Hearing

C. RAMON PORTALES, M.D.

Cause No.: 2004 MLB 0017

Re: Final Hearing

Parties and Counsel Present:

Jim Holden is present for the State.

Respondent is not present.

Participating Board Members:

Ms. Malone (hearing officer)

Dr. Stewart

Dr. Krejsa

Dr. Holt

Dr. Lankford

Dr. Beeson

Witnesses: None.

Case Summary: The Respondent lives in California and his Indiana license has been expired since the late 1980's. He was served at his last known address. The state requested the board issue a Notice of Proposed Default.

Board Action: A motion was made to issue a notice of proposed default.

Stewart/Holt

Motion carried 6/0/0

D. SALLY BOOTH, M.D. (CONTINUED)

Cause No.: 1998 MLB 0027

Re: Petition for Reinstatement

E. GREGORY LYNN BROWN, M.D.

Cause No.: 2005 MLB 0013

Re: Petition for Summary Suspension

Parties and Counsel Present:

Sara Matticks is present for the State.

Respondent was not present.

Participating Board Members:

Dr. Lankford (hearing officer)

Dr. Stewart

Ms. Malone

Dr. Krejsa

Dr. Holt

Dr. Beeson

Witnesses: None.

Case Summary: Respondent has a substance abuse problem and has fallen off of the wagon several times in the past. She spoke with Dr. Brown and has no objection to the Summary Suspension. The State entered a copy of the disciplined issued against his Kentucky license where he surrendered his Kentucky license.

State's Exhibit 1: KY Agreed Order of Surrender

Board Action: A motion was made to summarily suspend the license for 90 days.

Stewart/Holt
Motion carried 6/0/0

F. DAVID LYNN SKIDMORE, M.D.

Cause No.: 2002 MLB 0045

Re: Preliminary/Final Hearing – Extension of Summary Suspension

Parties and Counsel Present:

Sara Matticks was present for the state.
Respondent was not present.

Participating Board Members:

Dr. Lankford (hearing officer)
Dr. Stewart
Ms. Malone
Dr. Krejsa
Dr. Holt
Dr. Beeson

Witnesses: None.

Case Summary: Mr. Skidmore's counsel indicated that he would forward a new proposal agreeing to the indefinite suspension of Respondent's license; however this was not received by the Board. The state requested that the board issue a Notice of Proposed Default and continue the Summary Suspension.

Board Action: A motion was made to extend the Summary Suspension for an additional 90 days and to issue a Notice of Proposed Default.

Krejsa/Malone
Motion carried 6/0/0

G. SPURGEON GREEN, M.D.

Cause No.: 2004 MLB 0004

Re: Preliminary Hearing – Extension of Summary Suspension

Parties and Counsel Present:

Sara Matticks was present for the state.
Respondent was not present.

Participating Board Members:

Dr. Stewart (hearing officer)
Ms. Malone
Dr. Krejsa
Dr. Holt
Dr. Lankford
Dr. Beeson

Witnesses: None.

Case Summary: Respondent has been charged with felony murder in Georgia and is out on bond. The Georgia Medical Board found that 6 of his patients have died of overdoses due to the prescriptions written by Dr. Green. There is evidence to indicate that he has been prescribing to known addicts and the criminal investigation in Georgia continues. Currently, Dr. Green's Georgia medical license is suspended.

Dr. Green's attorney, O. Hale Almand, Jr., faxed a letter agreeing to the extension of the summary suspension for an additional 90 days.

Board Action: A motion was made to accept the motion and to extend the summary suspension for an additional 90 days.

Stewart/Krejsa
Motion carried 6/0/0

H. GUSTAVO M. OKRASSA, M.D.

Cause No.: 2004 MLB 0006

Re: Extension of Summary Suspension

Parties and Counsel Present:

Sara Matticks was present for the state.
Respondent was not present.

Participating Board Members:

Dr. Stewart (hearing officer)
Ms. Malone
Dr. Krejsa
Dr. Holt
Dr. Lankford
Dr. Beeson

Witnesses: None.

Case Summary: The Massachusetts Board of Registration of Medicine suspended this license on July 16, 2003. This discipline was based upon the fact that Dr. Okrassa was terminated from employment for diagnosing all of his patients with post-traumatic stress disorder; prescribing Xanax, Trazodone and Klonopin to all patients;

prescribing non-psychiatric medication and failing to adhere to the center's policy of requiring patients to undergo counseling. Respondent subsequently opened his own practice where he prescribed addictive medications to patients with histories of substance abuse and without proper evaluations. He did not maintain proper medical records. Dr. Okrassa did inform Indiana of this discipline in October 2003.

The final order from Massachusetts was issued and the Massachusetts Board placed Dr. Okrassa's license on indefinite suspension. The Ms. Stewart requested that the summary suspension be continued for an additional 90 days while they obtain the final order from Massachusetts.

The State requested the Board to renew the Summary Suspension for an additional 90 days.

Board Action: A motion was made to continue the Summary Suspension for an additional 90 days.

Holt/Krejsa
Motion carried 6/0/0

I. VALENTINO JOSEPH BIANCHINI, M.D.

Cause No.: 2004 MLB 0038

Re: Final Hearing

Parties and Counsel Present:

Steve Douglas was present for the State.
Respondent was not present.

Participating Board Members:

Dr. Krejsa (hearing officer)
Dr. Stewart
Ms. Malone
Dr. Holt
Dr. Lankford
Dr. Beeson

Witnesses: None.

Case Summary: Respondent has been disciplined in New York Steve attempted to contact Dr. Bianchini at his office with no success. Steve spoke with his attorney and was informed that Dr. Bianchini is now deceased. How should we proceed? We need to confirm that in some way in order to close his file.

The state requested the Board to issue a notice of proposed default.

Board Action: A motion was made to table until Mr. Douglas can ascertain whether the physician is alive or deceased.

Lankford/Stewart
Motion carried 6/0/0

J. YONGSOO KWON, M.D.

Cause No.: 2004 MLB 0044

Re: Final Hearing

Parties and Counsel Present:

Steven Douglas is present for the State.

Respondent not present.

Participating Board Members:

Dr. Stewart (hearing officer)

Ms. Malone

Dr. Krejsa

Dr. Holt

Dr. Lankford

Dr. Beeson

Witnesses: None.

Case Summary: Respondent was employed at Good Samaritan Hospital in Mt. Vernon, Illinois and performed a laparoscopic cholecystectomy on a female patient. She experienced post-operative complications and the hospital subsequently initiated an "emergency precautional suspension of privileges" on Respondent for performing a controversial surgery. Respondent resigned from Good Samaritan after this incident. January 8, 2002, Respondent applied for staff privileges at Community Hospital in Munster, Indiana. Community Hospital denied him medical staff privileges. On May 8, 2003, Respondent renewed his Indiana medical license online and answered "No" to all of the questions including question number 5 which asks: "Have you ever been denied staff membership or privileges in any hospital or health care facility or, have staff membership or privileges been revoked, suspended, or subjected to any restriction, probation, or other type of discipline or limitations?"

The State requested the Board to issue a notice of proposed default.

Board Action: A motion was made to issue a notice of proposed default.

Stewart/Lankford
Motion carried 6/0/0

VII. PRE-HEARING CONFERENCES

The Pre-hearing conferences were held before one member of the Board.

VIII. NOTICE OF PROPOSED DEFAULT

A. ROGER L. BARNARD, M.D.

Cause No.: 2004 MLB 0020

Parties and Counsel Present:

Steven Douglas was present for the State.

Respondent was not present.

Participating Board Members:

Dr. Stewart (hearing officer)

Ms. Malone

Dr. Krejsa

Dr. Holt

Dr. Lankford

Dr. Beeson

Witnesses: None.

Case Summary: Dr. Barnard was practicing medicine and writing prescriptions without having a valid medical license or Controlled Substance Registration (CSR).

Dr. Barnard sent a letter to the Health Professions Bureau, explaining why he did not attend the Board meeting in December. Mr. Douglas read the letter into the record. The Board took the letter into account. The State does not believe that this is a legitimate excuse. The state requested that the Board hold him in default.

A motion was made to hold the Respondent in default.

Lankford/Malone

Motion carried 6/0/0

The state proceeded on the record.

State's exhibit 1: Case report from Agent Kuzma of the DEA

State's Exhibit 2: Dr. Bernard's renewal forms Medical and CSR

State's Exhibit 3: Bob Bloss, Investigator for Pharmacy Board Report

There was a suspicious amount of activity with regard to narcotic prescriptions. When they visited him, his Medical license and CSR were both expired as of June 30, 2003. Ms. Kuzma and Mr. Bloss went to see Respondent December 16, 2003. They informed him that he was practicing without a license and prescribing without a CSR and he should stop. He did not stop practicing medicine or writing prescriptions. Per Exhibit 3, he continued to prescribe controlled substances.

The State requested the board find that the State met its burden and sanction Dr. Barnard appropriately.

Board Action: A motion was made to revoke

Stewart/Lankford

Motion carried 6/0/0

B. ERIC KEAHEY, M.D.

Cause No.: 2003 MLB 0036

Parties and Counsel Present:

Carrie Harmon and Steven Douglas were present for the State.
Respondent was not present.

Participating Board Members:

Dr. Holt (hearing officer)
Dr. Stewart
Ms. Malone
Dr. Krejsa
Dr. Lankford
Dr. Beeson

Witnesses: None.

Case Summary: Dr. Keahey faxed a letter to the Board indicating that he no longer lives in the UK, which is the address of record. He had a manic episode and the State was unable to locate him. Ms. Harmon contacted the Texas Board and found his information. According to Dr. Keahey, Texas is fully aware of his medical condition.

The State of Indiana requested the Board set aside the Notice of Proposed Default in order to speak with him and give him proper notice.

Board Action: A motion was made to hold the hearing in abeyance reschedule for a final hearing and give him new notice.

Malone/Krejsa
Motion carried 6/0/0

C. SILVERRENE ROUNDTREE, M.D.
Cause No.: 2004 MLB 0031

Parties and Counsel Present:

Jim Holden is present for the State.
Respondent was not present.

Participating Board Members:

Dr. Beeson (hearing officer)
Dr. Stewart
Ms. Malone
Dr. Krejsa
Dr. Holt
Dr. Lankford

Witnesses: None.

Case Summary: On November 2, 1998, Respondent's Virginia medical license was revoked by the Virginia Board following disciplinary hearings. The Virginia Board found that Dr. Roundtree provided improper and ineffective care in treating several of

her HIV/AIDS patients. She also prescribed and or administered large doses of methadone to a patient that Respondent knew or should have known was drug dependent for \$1000.00 cash. Respondent closed her Virginia Beach office without properly notifying her patients, among other charges. Subsequently, on April 19, 2000, Respondent's Maryland medical license was revoked by the Maryland Board based upon the Virginia Board action.

The state requested the board to hold her in default.

Board Action: A motion was made to hold Respondent in default.

Stewart/Lankford
Motion carried 6/0/0

The state proceeded on the record. Her license was disciplined in Virginia and Maryland.

State's Exhibit 1: Commonwealth of Virginia Final Order of Revocation
State's Exhibit 2: Maryland Board Order of Revocation

The state requested the Board to revoke her license.

Board Action: A motion was made to revoke the license.

Beeson/Stewart
Motion carried 6/0/0

D. ABDULHASSIB RASLAN, M.D.
Cause No.: 2004 MLB 0037

Parties and Counsel Present:
Jim Holden is present for the State.
Respondent was not present.

Participating Board Members:
Dr. Lankford (hearing officer)
Dr. Stewart
Ms. Malone
Dr. Krejsa
Dr. Holt
Dr. Beeson

Witnesses: None.

Case Summary: Respondent's Ohio license was permanently revoked after the Ohio Board conducted an investigation of Dr. Raslan's OB/GYN practice. Ohio found that in several instances Dr. Raslan's treatment and care fell below the minimal standard of care when he failed to transfer several patients from a level 1 facility to a tertiary facility; when he used low forceps to deliver a baby with no indications for their use; when he tried to deliver an infant vaginally via high station

Mityvac delivery when the patient's cervix was not completely dilated; and when he, among other things, inappropriately began an operative delivery when further observation of the patient was indicated.

The Board received a letter from Ms. Raslan indicating that Dr. Raslan does not live at their address nor does he receive mail at that address. However, the Respondent wrote the State and indicated that the address being utilized is his address of record in the U.S. and he is out of the country and does not intend to return to defend this matter.

The state requested the Board to hold the respondent in default.

A motion was made to hold the respondent in default.
Stewart/Krejsa
Motion carried 6/0/0

The state proceeded on the record.

Respondent was running a medical practice in Ohio and Indiana in the Amish community. He was disciplined in Ohio when his practice fell below the standard of care and thus his Ohio medical license was revoked. He also prescribed and gave unlicensed Amish midwives prescriptions to administer on their own.

State's exhibit 1: The State Medical Board of Ohio Final Order

Respondent is now practicing in Qatar and has been since February 2003. He has no plans to return to the U.S.

The state requested that the Board revoke his license.

Board Action: A motion was made to revoke his license.

Stewart/Lankford
Motion carried 6/0/0

IX. DISCUSSION ITEMS:

- a) Michael A. Lawless, HAD
Re: Appeal of Denial of Licensure

A motion was made to appoint Alan Reese as the ALJ on this matter.

Malone/Stewart
6/0/0

- b) Physicians Practicing Acupuncture
Re: Requirements

Can the Board create best practices guidelines or minimal training recommendations for physicians practicing acupuncture? ASJ and

Mr. Schmidt are to research the statute and report back to the board so that the board can promulgate rules on this and suggest that physicians get additional post-graduate training in acupuncture at an approved program.

Stewart/Lankford
6/0/0

- c) Stanley E. Thomas
Re: Petition for Reinstatement of his HAD Certificate

A motion was made to send him a letter with the list of approved psychiatrists and have him go to see one of the board approved psychiatrists.

Holt/Stewart
6/0/0

- d) NBOME
Re: Invitation to visit the Clinical Skills Testing Cite

The board reviewed the correspondence.

- e) Personal Appearances
Re: New process

Recommend dividing the personal appearances into two groups and to have them seen by one or two members as an ALJ. Then hold over the very serious applicants to go before the full board.

- f) LSA 04-325
Re: Professional Incompetence

- g) 844 IAC 4-4.5-15
Re: USMLE Step II, two parts

There is no need to change the rules because based upon the USMLE, they have not passed step II until they have passed both parts (CK and CSA).

- h) Sally Booth, MD
Re: Appearance and request to participate in hearing

A former patient of Dr. Booth wants to participate in the hearing concerning the reinstatement of Dr. Booth's license. Per Mr. Schmidt, AOPA allows for this under 25(f). It is the board's discretion as to whether they would allow her the opportunity to participate. The

Board does not want it to be testimonial, but rather a statement before the board with time limitations.

A motion was made to allow her to submit a written document with 5 minutes of an oral presentation.

Holt/Beeson
5/0/1 (Stewart opposed)

- i) William Mize, M.D.
Re: Pending Application

The staff needs to ask for more information from the Rhode Island Medical Licensing Board regarding his letter of concern and what exactly does it mean. ASJ to call Bruce McIntyre.

Stewart/Beeson
6/0/0

X. PERMIT/LICENSURE APPLICATIONS

A motion was made and seconded to approve all recommendations and decisions made by the Board members on applications for licensure that were reviewed throughout the Board meeting and at any other time since the last Board meeting.

Krejsa/Stewart
Motion carried 4/0/0

XI. ADJOURNMENT

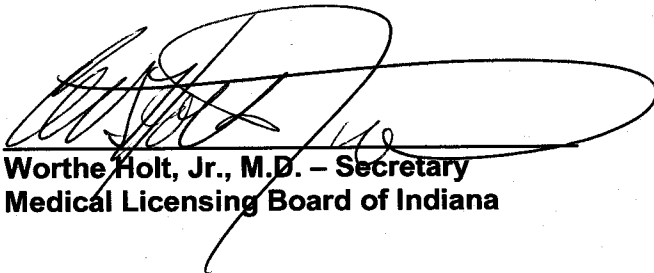
There being no further business and having completed its duties, the meeting of the Medical Licensing Board of Indiana adjourned at 6:00 p.m.



Bharat Barai, M.D. – President
Medical Licensing Board of Indiana

3/24/05

Date



Worthe Holt, Jr., M.D. – Secretary
Medical Licensing Board of Indiana

3/24/05

Date